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L4 ANSWER 23 OF 26 CANCERLIT
 AN 86620257 CANCERLIT
 DN 86620257
 TI MAPPING THE ANTIGENIC REGIONS OF EPSTEIN-BARR NUCLEAR ANTIGEN USING
 SYNTHETIC PEPTIDES.
 AU Rhodes G; Houghten R A; Carson D A; Valbracht J; Vaughan J H
 CS Scripps Clinic and Research Foundation, La Jolla, CA 92037.
 SO UCLA Symp Mol Cell Biol, (1984). New Ser 21, pp. 487-96.
 DT (MEETING PAPER)
 FS ICDB
 LA English
 EM 198604
 AB The viral DNA encoding for the Epstein-Barr nuclear antigen (**EBNA**) contains a repeating sequence that is expressed as a run of over 200 amino acids consisting only of glycine and alanine. The authors synthesized nine peptides from the middle, ends, and outside of this repeating region of the protein; six of these peptides were used to detect antibodies to **EBNA** in human sera. Antipeptide activities of specimens of human sera were measured with the aid of an enzyme-linked assay in microtiter plates. No sera of 27 individuals who were Epstein-Barr viral capsid antigen (VCA) negative reacted against any of six peptides used in the assay; in contrast, all VCA+ samples reacted with the peptides, the highest recognition generally occurring with the peptides containing all glycine and alanine. IgG antibody titers to the peptides in patients with acute and convalescent mononucleosis rose in conjunction with those directed against **EBNA**. When tested at a dilution of 1/320, sera of rheumatoid arthritis patients had antibody levels higher than those for normal subjects, for every peptide tested; systemic **lupus** erythematosus patients had an average titer higher than that for normal subjects, only for the glycine-alanine-containing peptides. Antibody titers of sera from Sjorgren syndrome and progressive systemic sclerosis patients had titers that did not differ from those of normal subjects. Sera with high titers to **EBNA** recognized some of the peptide sequences better than others; this finding implies that human antibodies to **EBNA** are directed at selected portions of the protein. Further studies of peptides should provide a method of mapping the antigenic determinants. (12 Refs)

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ACCESSION NUMBER: 97104028 EMBASE
DOCUMENT NUMBER: 1997104028
TITLE: Immunoblotting reactivity of sera from patients with
autoimmune connective tissue diseases against
Epstein-Barr nuclear antigen (EBNA) polypeptides.
AUTHOR: Ngou J.; Segondy M.
CORPORATE SOURCE: M. Segondy, Laboratoire de Virologie, Hopital Saint-Eloi,
Centre Hospitalier Universitaire, 34295 Montpellier Cedex
5, France
SOURCE: Serodiagnosis and Immunotherapy in Infectious Disease,
(1996) 8/2 (105-108).
Refs: 21
ISSN: 0888-0786 CODEN: SIIDE3
PUBLISHER IDENT.: S 0888-0786(96)01059-1
COUNTRY: Netherlands
DOCUMENT TYPE: Journal; Article
FILE SEGMENT: 004 Microbiology
026 Immunology, Serology and Transplantation
LANGUAGE: English
SUMMARY LANGUAGE: English

AB The **antibody** responses to Epstein-Barr nuclear antigen (EBNA)
polypeptides were analyzed by immunoblotting in 93 patients with
autoimmune connective tissue diseases (ACTD) in comparison with 50
clinically healthy control subjects. **Antibody** frequencies to
EBNA-2, -4, and -6 were significantly higher in patients than in
controls.
Among the patients with ACTD, those with systemic lupus erythematosus
(SLE) showed a significant increase in the frequency of anti-EBNA-3
antibodies. These results confirm the particularity of the
antibody responses against **Epstein-Barr**
virus (EBV) polypeptides in patients with ACTD; they could either
reflect basic immune disturbances or suggest a participation of EBV in
the
pathogenesis of the disease.

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DOCUMENT NUMBER: 1994084024
 TITLE: Soluble Fc.epsilon.RII/CD23 in patients with
autoimmune diseases and **Epstein-**
Barr virus-related disorders: Analysis by
 ELISA for soluble Fc.epsilon.RII/CD23.
 AUTHOR: Yoshikawa T.; Nanba T.; Kato H.; Hori K.; Inamoto T.;
 Kumagai S.; Yodoi J.
 CORPORATE SOURCE: Department of Biological Responses, Institute for Virus
 Research, Kyoto University, 53 Shogoin-Kawahara-cho, Sakyo,
 Kyoto 606-01, Japan
 SOURCE: ImmunoMethods, (1994) 4/1 (65-71).
 ISSN: 1058-6687 CODEN: IMUME8
 COUNTRY: United States
 DOCUMENT TYPE: Journal; Article
 FILE SEGMENT: 004 Microbiology
 005 General Pathology and Pathological Anatomy
 026 Immunology, Serology and Transplantation
 029 Clinical Biochemistry
 048 Gastroenterology
 037 Drug Literature Index
 LANGUAGE: English
 SUMMARY LANGUAGE: English
 AB The low-affinity Fc receptor for IgE (Fc.epsilon.RII/CD23) and its
 soluble

form (sCD23, IgE-binding factor) have multiple functions, and enhanced
 levels of these are associated with various immunological diseases. We
 established two sensitive ELISA systems using enzyme-conjugated mAb and
 biotinylated mAb. The detection limits of the ELISA systems were 0.03 and
 1.0 ng/ml, which showed good correlation in the range 1.0-10 ng/ml. In
 the ELISA system using enzyme-conjugated mAb, the average sCD23 concentration
 in 303 normal healthy volunteers was 1.4 ± 0.3 ng/ml. In the ELISA
 system using biotinylated mAb, sCD23 levels in normal healthy volunteers
 showed almost the same values. In patients with **autoimmune**
 diseases such as rheumatoid arthritis, systemic lupus erythematosus,
 Sjogren syndrome, progressive systemic sclerosis, and mixed connective
 tissue disease, the sCD23 levels were significantly higher than those in
 normal individuals. Furthermore, in **Epstein-Barr**
virus-related disorders after liver transplantation with
 immunosuppression, plasma levels of sCD23 rapidly increased to more than
 12 ng/ml when clinical symptoms were evident. In addition, the sCD23
 values remained high, although elevated GOT levels gradually decreased to
 standard values and EBV hepatitis improved. These data suggest that sCD23
 levels are a sensitive marker of **autoimmune** diseases and
 EBV-related disorders in addition to allergic disorders. The ELISA system
 for sCD23 may be an additional **diagnostic** tool in estimating the
 clinical courses of these diseases.